Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10-620-698

FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS	17Y EE 0.00 18 14 72
FOR	72 N TY
TOTAL CHARGEABLE CLAIMS	72 72 N TY
NDEPENDENT CLAIMS	72 N TY DDI- INAL
NULTIPLE DEPENDENT CLAIM PRESENT	72 N TY DDI- INAL
# If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS REMAINING AFTER PREVIOUSLY PRIOD FOR AMENDMENT PREVIOUSLY PRIOD FOR PRESENT PREVIOUSLY PRIOD FOR PRIOD FOR PREVIOUSLY PRIOD FOR	72 AN TY DDI- DAL
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) CLAIMS REMAINING AFTER AMENDMENT Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM CCOlumn 2) (Column 3) *** CCOlumn 3) *** Total * Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM CCOlumn 3) CLAIMS REMAINING AFTER AMENDMENT *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM CCOlumn 3) CLAIMS REMAINING AFTER AMENDMENT CLAIMS REMAINING AFTER AMENDMENT Total * Minus *** Total T	N TY DDI- DNAL
Column 1	TY DDI- NAL
Column 1)	TY DDI- NAL
REMAINING	NAL
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
+140 =	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Minus *** Column 2) (Column 3) Claims Highest Present Extra Previously Paid for Extra FEE	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total Minus ** Minus ** Minus ** Column 2) (Column 3) HIGHEST NUMBER PRESENT EXTRA PRESENT EXTRA RATE TIONAL FEE OR X\$18= CD X\$42= CD X84=	
CLAIMS REMAINING AFTER AMENDMENT Total * Minus *** Minus *** Minus *** Minus *** ADDI- TIONAL FEE ARTE TIONAL FEE CR X\$18= CR X\$42= CR X\$42= CR X\$42= CR X\$42=	
REMAINING AFTER PREVIOUSLY PAID FOR PRESENT EXTRA Total * Minus *** = X\$ 9= OR X\$18= Independent * Minus *** = X42= OR X84=	
Total * Minus ** =	DI- NAL EE
Independent * Minus *** = X42= OR X84=	
I FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
+140= OR +280=	
TOTAL OR ADDIT. FEE ADDIT. FEE	
(Column 1) (Column 2) (Column 3)	
AFTER PREVIOUSLY EXTRA RATE TIONAL RATE TIO	DDI- NAL EE
Total * Minus ** = X\$ 9= OR X\$18=	
Independent * Minus *** = X42= OR X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR A42= OR A84=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.	